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ABSTRACT

As part of the ongoing efforts in the state of Alaska to improve the health and well-being of the state's young children, the Alaska Departments of Education and Early Development and Health and Social Services are collaborating to develop a plan to address the critical outcomes and strategies that will support and improve the lives of Alaska's children and families. This report identifies many of the challenges facing Alaskan children and their families and identifies outcomes, beginning strategies, and indicators to help measure progress. Following an introduction, the report is presented in five sections. Section 1, "Assuring Maternal and Child Health," focuses on improving birth outcomes and the newborn's earliest environment, ensuring that children maintain physical and mental health, and protecting children from harm and injury. Section 2, "Enhancing Early Care and Education," delineates markers of high-quality programs. Section 3, "Supporting Healthy Stable Families," describes family responsibilities and delineates characteristics of resilient children. Section 4, "Developing Supportive Neighborhoods and Communities," describes characteristics of a healthy community. Section 5, "Establishing Support Systems," notes the importance of collaboration at the state and local level and details state responsibilities. In each section, positive outcomes are identified, suggested strategies are delineated, and possible indicators to measure progress and gauge success in achieving outcomes are listed. In addition, each section provides questions to guide community or agency/business self-evaluation regarding possible contributions to the identified outcomes. The report concludes with the charge that Alaskan citizens, communities, and organizations identify at least one action they can take that will make a difference for children. (KB)

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Building Blocks: The Next Steps for Supporting Alaska's Young Children and Their Families.

State of Alaska
Department of Education & Early Development
Department of Health & Social Services

2000

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STATE OF ALASKA

Department of Education & Early Development
Department of Health & Social Services

TONY KNOWLES, GOVERNOR

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Juneau, Alaska 99811-0601

August 2000

Dear Alaskans:

Please join us in supporting these exciting next steps for Alaska's young children and their families. Our department staff and lots of you who work on behalf of children have dreamed of the day when everyone would work together in support of new and innovative ways to improve children's lives. We hope this document helps make that dream a reality.

It is the logical next step in ongoing efforts by Gov. Tony Knowles and Lt. Gov. Fran Ulmer to help children succeed. Through creation of the Children's Cabinet, the "Smart Start for Alaska's Children" initiative, the Children's Budget and many other efforts, we have made great progress. We must keep moving forward.

Because we know the early years—prenatal through 8—are critical for overall child development, we must make sure those years are the best possible. We must work together to make sure every pregnant woman gets adequate prenatal care and nutrition; every child grows up in a nurturing, safe home and community; that all children have hope; and that all children succeed in school and life.

This report identifies many of the challenges facing our young children and their families. It also identifies outcomes, beginning strategies and indicators to help us measure progress. It is our belief that achieving these outcomes will make a significant difference in the health and well-being of Alaska's youngest citizens.

Our children need each of us—the agencies and organizations we work for, and our communities—to work together in new and exciting ways. Our challenge is:

- Are we willing to do things differently?
- What can each of us do?
- How can our programs and services be more coordinated and tailored to meet the individual needs of children, families and communities?
- What action are you willing to take and when?

We thank you for your past support of "Smart Start" and other efforts to improve child well-being. We look forward to working with you on this project to better the lives of every Alaska child.

Sincerely,

Richard S. Cross, Commissioner
Education & Early Development

Karen Perdue, Commissioner
Health & Social Services

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A SHARED VISION

Alaska's young children will be healthy, safe, and successful at home, at school, and in their communities.

OUR PURPOSE

To improve the health and well-being of Alaska's young children, prenatal through age 8, by creating a comprehensive, collaborative initiative to ensure our collective energies address the critical outcomes and strategies that will support and improve the lives of Alaska's children and families and also that will help us gauge our progress.

OUR GUIDING PRINCIPLES

Our guiding principles consider the ideal early childhood system to be one that is:

- Developmentally appropriate
- Outcome-based and measurable
- Focused first on prevention
- Strength-based instead of deficit-based
- Focused on self-sufficiency
- Collaborative
- Locally owned/community based
- Staffed by a quality workforce
- Assisted by effective management systems
- Non-duplicative
- Accessible
- Information based
- Seamless
- Comprehensive
- Built on providing hope and success for every child

INTRODUCTION

Building Blocks articulates a shared vision for our children—the critical outcomes and strategies that will improve child well-being and the measures that will help us gauge our progress. Our vision for healthy, successful children begins before birth and goes through childhood.

Consider that in 1997, 9,956 infants were born in our state and 41 of them died between their twenty-eighth day of life and their first birthday. These tragic numbers reflect one of the highest post-neonatal death rates in the nation and tell us that too many babies in Alaska aren't getting what they need to simply survive their first year of life. The reality is, the majority of these infant deaths are preventable.

Young children in our state face other significant hurdles. Therefore, this plan looks at:

- assuring maternal and child health;
- enhancing early care and education;
- supporting healthy stable families;
- developing supportive neighborhoods and communities; and
- establishing support systems.

We recognize that childhood is a continuum where strength builds upon strength. Together, we will continue the hard work of supporting young children and their families.

WHERE WE START

We begin by identifying the tasks that the state Departments of Education & Early Development and Health and Social Services can undertake to support children and families. It is essential for these two departments, which bear primary responsibility for children's programs and services, to develop sustainable partnerships and a commitment to plan and deliver comprehensive services to children and families.

It is our intent to work together to erase the notion that young lives can be divided neatly into agency jurisdictions, and to recognize that childhood is a continuum where strength builds on strength.

Using this initial document as a framework, we will continue the hard work of describing exactly what must be done, when and by whom.

WHY WE NEED YOUR HELP

Families are the foundation for each child's success and each Alaskan has a role; it is the state's responsibility to partner with families and communities to help children grow up safe, healthy and successful.

As our families, communities and businesses take up specific strategies, things will improve for children. We know that by reversing trends in some critical areas of children's lives, we can expect to see improvement in many other areas as well. The net result will be children who are successful now and, finally, as adults.

Families are the foundation for each child's success and each Alaskan has a role; it is the state's responsibility to partner with families and communities to help children grow up safe, healthy and successful.

HOW YOU CAN HELP

This initiative frames common goals for children birth to age 8, sets out broad strategies, both traditional and innovative, and identifies how we will measure progress.

The strategies included here are intended as a beginning. There is room to review, evaluate and change.

It is our hope that this effort will inspire each of us to ask ourselves:

What can my community do?

What can my agency/business do?

What can I do?

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ASSURING MATERNAL AND CHILD HEALTH

Challenges

Most Alaska mothers and their young children are healthy and thriving. There remains, however, much room for improvement. Alaska has a high rate of unintended pregnancies and performs poorly on measures of prenatal health. More alarming still, is the fact that Alaska has one of the nation's highest death rates for babies between one month and one year of age. Among children ages 1 to 14, deaths due to illness and injury consistently exceed the national average.

This section focuses on improving birth outcomes and the newborn's earliest environment; ensuring that children maintain physical and mental health; and protecting children from harm and injury. We will work towards:

By informing Alaskans about relevant health issues and making good prenatal care accessible, we can increase the number of babies born healthy.

Planned Pregnancies

Unintended pregnancy is the common thread that connects many risk factors for babies. In Alaska, 41 percent of babies born during 1997 were the result of unintended pregnancies. According to an Institute of Medicine report, women with unintended pregnancies are:

- More likely to expose the fetus to harmful substances;
- Less likely to seek early prenatal care;
- At greater risk of separating from their husband or partner;
- At greater risk of economic hardship;
- More likely to report having experienced domestic violence; and
- More likely to abuse drugs or alcohol.

In 1997, 15 percent of infant deaths in Alaska were caused, in part, by maternal drug or alcohol abuse, according to a recent study. In an additional 21 percent of infant deaths that year, parental drug or alcohol abuse was documented.

Safe Motherhood

Physical violence against women during pregnancy is another serious health concern. Ten percent of Alaska mothers who delivered a baby between 1996 and 1997 reported that they were abused in the year prior to or during their pregnancy. The problem is especially prevalent among teenagers and Alaska Native women. Women who are involved in violence or who are physically assaulted during pregnancy are significantly more likely to deliver babies that are premature, distressed or stillborn.

The three most common causes of infant death in Alaska are pre-term birth, Sudden Infant Death Syndrome and other suffocation of unknown cause, and birth defects. Based on current scientific knowledge, an estimated 42 percent of these deaths are preventable.

Reduction of Adverse Birth Outcomes

The risk of adverse birth outcomes also goes up when a pregnant woman:

- Is less than 18 years of age;
- Is more than 35 years of age;
- Has had four or more previous births;
- Has conceived more than once in 18 months; or
- Is carrying multiple fetuses, particularly as a result of assisted reproductive technology.

Keeping Children Safe

Alaska children face other dangers as they grow up. In 1997, there were 41 deaths among children between the ages of 1 and 9 in Alaska. Of these deaths, 63 percent were the result of injury.

Motor vehicle accidents accounted for the largest number of deaths, followed by plane crashes, drowning, poisonings and fires. The Alaska Bureau of Vital Statistics estimates that among children under age 7 who died in Alaska in 1997, 38 percent were not adequately supervised at the time they were fatally injured. Sixteen percent died when houses without working smoke detectors caught fire.

Statewide, 15 in every 1,000 Alaska children suffers from abuse — most at the hands of a parent.

Abuse and neglect deaths in Alaska are six times more common among infants of mothers with less than a 12th grade education.

DID YOU KNOW?

In 1997, 15 percent of infant deaths in Alaska were caused, in part, by maternal drug or alcohol abuse, according to a recent study. In an additional 21 percent of infant deaths that year, parental drug or alcohol abuse was documented.

A recent survey of Alaska women of childbearing age found that only 24 percent knew that folic acid prevents birth defects.

An estimated 70 percent of Alaska mothers do not receive domestic violence screening in prenatal care settings.

Positive Outcomes

These are some of the challenges that face us as we attempt to assure maternal and child health. By working together, we can achieve the desired positive outcomes to ensure healthy, successful children.

OUTCOME #1

Babies are born healthy.

Achieving this goal means providing information and support to Alaskans before and during pregnancy to help them give their babies the best start in life.

By informing Alaskans about relevant health issues and making good prenatal care accessible, we can increase the number of babies born healthy.

Specifically, we can:

- Reduce the number of fetal and infant deaths;
- Reduce the number of babies born underweight or pre-term;
- Reduce the occurrence of Fetal Alcohol Syndrome, developmental disabilities, spinal bifida and other neural tube defects, and HIV in newborns; and
- Ensure that health problems are identified and treated early.

Suggested Strategies

1. Make prenatal care more accessible and affordable for Alaska women.
2. Support domestic violence screening, intervention and referral systems in prenatal-care settings.
3. Develop a statewide public awareness campaign about the importance of appropriate prenatal care, including the use of multivitamins and folic acid.
4. Discourage the use of tobacco, alcohol, and drugs before conception and during pregnancy.
5. Ensure that women of childbearing age have immediate access to alcohol and drug abuse treatment programs.
6. Assure that pre-conceptional education is available to Alaska women to provide them with information about alternatives to childbearing, health habits and other issues to be considered when planning a pregnancy.
7. Assure that contraceptive services are available to mothers for at least 18 months after the birth of a child.
8. Implement a universal newborn hearing screening program that provides screening, assessment, diagnosis and treatment for hearing disorders.
9. Support public-awareness campaigns aimed at preventing infant injury and death (such as the "Back to Sleep" and the "Never Shake a Baby" campaigns.)
10. Make certain that eligible pregnant women and babies are enrolled in Denali KidCare and WIC.

OUTCOME #2

Children's physical health and mental health needs are met.

Disease prevention and early detection of health problems can profoundly influence a child's future soundness of body and mind. Children need routine and preventive medical and oral health care, and attention to behavioral and developmental issues. Specialized, interdisciplinary treatment should be available to children with complex or chronic health problems.

In addition to biological factors affecting a child's health, normal growth and development depend on good nutrition, comprehensive health care, and a safe home and environment.

Suggested Strategies

1. Increase the number and percent of schools offering child care and other services that encourage young mothers to complete high school.
2. Increase the number of school nurses in schools statewide.
3. Ensure that all women and young children have access to adequate nutrition.
4. Ensure that all newborns, before leaving the hospital, receive a comprehensive health and developmental screening/examination.
5. Ensure that babies identified on newborn screenings (metabolic and hearing) leave the hospital with a plan for follow-up evaluation and treatment if necessary.
6. Offer a follow-up telephone call or home visit to all families of newborns to answer questions and assess the health of the mother and child.
7. Ensure that high-risk newborns, such as low-birth-weight babies, receive appropriate care in the hospital and at home following discharge.
8. Provide regular, periodic, developmental and basic physical and mental health screenings for all children.
9. Ensure that children identified through evaluations as having special health or developmental needs receive appropriate services.
10. Encourage families to establish a continuing relationship with a primary heathcare provider.
11. Promote public awareness about the importance of immunizations for children from birth to 5 year olds. Ensure easy access to immunizations.
12. Ensure that children who are removed from their natural homes receive appropriate physical and mental health and developmental assessments to determine what services they need.
13. Identify and refer families who may be eligible for Medicaid or child insurance programs.
14. Provide school-based health and counseling programs, including substance abuse counseling and treatment for young children.
15. Increase the number of children with access to affordable medical, dental and mental health care.

OUTCOME #3

Children are free from harm and injury.

Alaska has the second highest rate in the nation for post-neonatal deaths, those occurring between the first month and first year of life. Only the District of Columbia fares worse on this measure.

The post-neonatal death rate is closely associated with specific risk factors in babies' homes, including drug or alcohol abuse, domestic violence, child abuse or neglect, or serious maternal illness.

Beyond infancy, Alaska children face other dangers at home and in their neighborhoods and communities. Between 1994 and 1997, young children in Alaska required hospitalization as a result of 355 falls, 118 poisonings and 55 dog bites.

Last year, the state Division of Family & Youth Services received 16,294 reports of suspected child abuse. About two-thirds of these reports involved children under 10 years of age.

Suggested Strategies

1. Implement a child-injury prevention program that focuses on both intentional and unintentional injuries.
2. Promote public awareness of and intolerance for child abuse and neglect.
3. Ensure that criminal records checks are part of the hiring procedure for all staff in any facility that deals with the direct care of children.
4. Ensure that the state adequately monitors foster homes to promote the health and safety of the foster child.
5. Promote the use of safety devices: child passenger restraints, life-jackets, helmets, smoke detectors and gun locks.
6. Expand proven parent education, including traditional cultural-based parenting, and support counseling programs to teach parents non-violent conflict resolution in order to prevent child abuse and neglect.
7. Implement community-based programs to help families and children cope with the effects of living in unsafe and violent communities.

INDICATORS

The following indicators will be used to measure progress and gauge success in achieving outcomes:

- The rate of unintended pregnancy
- The proportion of pregnant women who receive early and adequate prenatal care
- The rate of alcohol, cigarettes, and illicit drug use among pregnant women
- The post-neonatal death (between 28 days and one year) rate
- The rate of completed immunizations for children 5 years of age
- The rate of intentional and unintentional injuries in children 1-8 years of age
- The rate of substantiated child abuse and neglect
- The number of children wait-listed for early intervention services

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Next steps to assuring maternal and child health

What can my community do?

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What can my agency/business do?

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What can I do?

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ENHANCING EARLY CARE AND EDUCATION

Background

Early care and education refers to programs serving children from birth through age 8. Recent research links high-quality early care and education to long-term positive outcomes for children in educational achievement, economic well-being and social/emotional behavior.

Key markers of high-quality programs are:

- healthy, safe environments;
- adequately staffed with well-trained and well-compensated personnel;
- family-centered, recognizing families as the primary educators and nurturers of children;
- community-based, recognizing that the most effective programs are planned for and implemented locally;
- child-centered and developmentally appropriate with on-going and varied methods of assessments;
- nurturing of staff, children and families;
- culturally responsive;
- inclusive of children with special needs and abilities; and
- supportive of children's physical, social, emotional and intellectual well-being.

Additionally, research shows providing effective services for young children is less about bridging the gap between different types of programs and more about ensuring continuity in these key markers of quality.

The benefits of high-quality early care and education can only be maintained if the same key elements of quality are present in all types of programs, including public school programs. As more parents and families understand the key elements of high-quality programs, they will require it for their children.

Adults born in poverty who attended a high-quality, active learning preschool program, have half as many criminal arrests and have higher earnings and property wealth than those who did not. The public will receive more than $7 in return for every dollar invested in quality preschools.

DID YOU KNOW?

In January 1998, there were 450 active family child care providers who were exempt from licensing regulations and who self-certified that they met the minimum health and safety standards. In May 2000, this number totaled 1,100.

Despite a high exposure to illness on the job, less than one-third of child care workers have health insurance and even fewer have a pension plan. The average wage of child care workers in Alaska is $8 an hour.

During Fiscal Year 1999, Alaska lost approximately 733 licensed child care spaces.

OUTCOME #1

All early care and education for children birth through age 8 is high quality.

In 1999, Head Start served 3,351 children —23 percent of the eligible children who live in poverty.

Recent studies indicate that most of the settings where young children receive care fall short of the key markers of quality. Directly linked to program quality are staff education and experience, wages and turnover rate.

Today, providers who work in child care settings receive poverty level wages with few or no benefits or training opportunities. Low wages and poor working conditions account for the fact that child care has one of the highest turnover rates of any occupation.

Other critical links to quality are the standards and regulations that guide early care and education programs; and the state's ability to provide technical assistance, monitor programs and enforce regulations.

Suggested Strategies

1. Establish early care and education program standards and regulations that reflect markers of quality.
2. Require all early care and education programs to meet or exceed established health, safety and program standards.
3. Develop and implement trainer qualification and course standards for early childhood education across the state.
4. Provide statewide access to professional development in early childhood education.
5. Establish education standards for early care and education practitioners.
6. Require early care and education practitioners to meet educational standards for their position.

7. Improve the wages and benefits of people who work in the early care and education field.
8. Require all early care and education programs to have an active parent involvement component.

OUTCOME #2

All children and families can find and access appropriate early care and education.

Access to reliable, high-quality programs that meet the individual needs of children and families is essential for parents to achieve and sustain self-sufficiency; for children's health and intellectual development; and to provide support for children at risk.

Family economic pressures, welfare reform, single-parent homes and other factors all have contributed to an increased demand for out-of-home care and education.

While some families have reasonable access to early care and education programs, a substantial number of Alaska families cannot find or afford care that meets their needs. For example, regular early care and education arrangements are often beyond the reach of working poor families if they do not have access to subsidies.

Specialized care for infants, children with special needs or care that accommodates evening, weekend or rotating work schedules is in short supply.

Some children live in families that face serious challenges and risk factors such as poverty, abuse and neglect, illiteracy, homelessness and serious emotional/behavior problems.

These risk factors can seriously compromise child and family well-being. Fortunately, risk is not destiny. Study after study shows that timely, intensive and comprehensive early intervention can improve quality of life and give children at risk a chance for success.

The average annual cost of college tuition at the University of Alaska is $3,465. The average annual cost of preschool care in Fairbanks is $5,676. The average annual cost of infant care in Fairbanks is $6,840.

Suggested Strategies

1. Increase the supply of early care and education programs for all children birth through age 8, especially programs serving infant/toddlers and school-age children, and those operating during non-traditional hours.
2. Increase opportunities for all children, ages 3-5, to participate in early childhood education programs.
3. Provide opportunities for children with special needs to be educated and receive services with their non-disabled age mates in typical early childhood settings.

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Specialized care for infants, children with special needs; or care that accommodates evening, weekend or rotating work schedules is in short supply.

4. Change the subsidy rate schedule to reflect the policy of parents paying no more than 10 percent of their income for child care.
5. Provide parents and the public with consumer information that promotes informed early care and education choices.
6. Encourage employer involvement in providing child care resources for employees.
7. Provide technical assistance to communities interested in determining and planning for the child care needs of parents, families and children in their community.

OUTCOME #3

All children have the opportunities and supports they need to succeed in school.

When children have appropriate supports during their early years, they are more likely to enter kindergarten socially and linguistically competent, and physically and emotionally healthy.

These supports cannot end at the beginning of public school. To maintain the developmental growth and progress made by children in the early years, elementary schools must ensure key markers of quality are present in public school programs.

Currently, prevention and early intervention programs in Alaska serve only a fraction of eligible children. In 1999, Head Start served 3,351 children—23 percent of the eligible children who live in poverty. Even Start Family-Literacy programs served 164 children and 75 families of enrolled children.

Suggested Strategies

1. Support children in the continuation of their home culture and language while helping them to speak, read and write English.
2. Provide resources for children in transition and those who are not making expected developmental progress to receive individual supports.
3. Require K-3 teachers to be certified in early childhood development or acquire an early childhood endorsement.
4. Use a variety of appropriate methods to regularly assess and monitor children's progress in all areas of development.
5. Establish partnerships between parents, health, social services, early care and education programs, elementary schools, local boards and organizations to insure continuity of quality, comprehensive care and education through grade 3.

6. Develop collaborative health plans that address health and education, including: environment; health education; meals and nutrition; physical education; health services; counseling, psychological and mental health services; staff wellness; family/parent and community partnerships.
7. Support elementary schools in their efforts to have an ongoing and comprehensive safety/conflict resolution program in place, which is coordinated between families, the school, and the community.
8. Ensure mental health specialists are available to assist early care and education providers, teachers, parents and other program personnel with the identification of early warning signs of negative or disruptive behavior, barriers to learning and child/student success, and to provide guidance and intervention strategies.
9. Require full-day/every-day kindergarten, with children in attendance at least four hours a day.

Fortunately, risk is not destiny. Study after study shows that timely, intensive and comprehensive early intervention can improve quality of life and give children at risk a chance for success.

INDICATORS

The following indicators will be used to measure progress and gauge success in achieving outcomes:

- Percent of providers/teachers who have a Child Development Associate (CDA) credential or beyond in early childhood education
- Average wage of staff at child care centers
- Number of early care and education programs that meet national accreditation standards for quality
- Percent of child care providers working in the same program continuously for one year
- Number of child care slots available for every 100 infants
- Number of child care slots available for every 100 children ages 12 months to 13 years
- Percent of eligible Head Start children who are served
- Percent of all kindergartners who attended preschool
- Percent of students proficient in reading, writing, and math at the end of third grade
- Percent of kindergarten children who demonstrate all of the tasks/behaviors in the four developmental areas included on the Alaska Developmental Profile

Next steps to enhancing early care and education

What can my community do?

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What can my agency/business do?

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What can I do?

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SUPPORTING HEALTHY STABLE FAMILIES

Possibilities

From the moment of birth, children depend on their parents and families to provide for their needs. Families are responsible for:

- **Economic support.** The family is the social unit that provides life-sustaining resources—food, clothing, shelter and other necessities.
- **Health care and wellness.** In addition to providing for the basic health care needs of children, the family must protect its members against family and community violence, emotional, physical, and sexual abuse.
- **Education and socialization.** The family is the primary educator of children and is responsible for transmitting social and cultural values. Setting, teaching and enforcing rules, norms and appropriate behaviors transmits social values.
- **Family maintenance.** Families are the main providers of the emotional nurturance, intimacy, understanding and support that sustains children.

Young children have a greater chance of achieving success if these needs are met. When these needs have been met, children have the opportunity to grow physically, emotionally and intellectually.

Some families face challenges and hardships that make it difficult or impossible to meet the needs of their children. For families facing multiple hardships, comprehensive prevention and early intervention, extended family and community support are essential.

Extensive research tells us that children are naturally resilient beings, and that, given the right supports, healthy children can emerge from unhealthy situations.

The main characteristics of resilient children are:

- social competence;
- problem solving ability;
- a positive outlook on life;
- a sense of autonomy; and
- a sense of control over what happens to them.

Instead of waiting for children to experience multiple hardships, our systems should act earlier, integrate and enhance what is available to families and aim to practice family-centered services.

This focus area is directed at ensuring the basic needs of all children are met—that parents and families have the supports they need to nurture their children. If these goals are met, children are likely to be safe in their homes.

For those children who need external supports to keep them safe, services must be provided swiftly to guarantee their safety.

DID YOU KNOW?

Instead of waiting for children to experience multiple hardships, our systems should act earlier, integrate and enhance what is available to families and aim to practice family-centered services.

In Alaska, eighty-three percent of female prison inmates were sexually abused before the age of 12.

Seventy percent of all open child protection cases involve some form of substance abuse.

The economic stability of families is fundamental to the well-being of children.

OUTCOME #1

Children live in families where their basic needs are met.

Children are dependent on the adults in their lives and on the environment around them to provide for their most basic needs including food, clothing, safe and secure housing, health care and freedom from harm.

Beyond these basic needs children require healthy experiences that promote their physical, social and emotional development. In order for families to meet even the most basic needs of children, they must have training, education and opportunities for meaningful employment. The economic stability of families is fundamental to the well-being of children.

Suggested Strategies

1. Promote employability of parents so they have the possibility of jobs with benefits and affordable child care that will allow them to work.
2. Ensure families receive assistance for basic needs, especially health care, while building skills to become self-sufficient.
3. Support the development of accessible housing for families with different income levels.

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OUTCOME #2

Parents and families have the skills and knowledge to nurture, educate and advocate for their children and themselves.

Every family, regardless of income or education, needs support to meet their children's needs and to deal with today's parenting challenges.

Most Alaska families get the support they need to meet the needs of their children. But for some families, life is changing in ways that can undermine efforts to nurture children.

Every family, regardless of income or education, needs support to meet their children's needs and to deal with today's parenting challenges.

Supports are the skills, opportunities, experiences and resources that help families fulfill their responsibilities, grow and develop, overcome challenges and achieve success.

Supports may include the expertise of a pediatrician, the encouragement of a teacher, a job training program, or guidance from the family's church. Supports are not meant to become a substitute for families; they are intended to strengthen family functioning.

One of the most often cited family stressors is the growing economic pressure on families. Today, there are more working mothers and more single parent families—26 percent of Alaska families are headed by single parents; more family isolation and violence; and more young children in poverty—12-19 percent statewide with rates as high as 30 percent in Southwest Alaska.

Families experiencing these and other challenges need extra help to meet the basic needs of their children.

Suggested Strategies

1. Provide all families with information about early development.
2. Include parents in planning and decision-making processes at both the program and individual service level.
3. Provide parents with needed supports to foster their child's development, especially parents of children with special needs.
4. Provide all students with information on child development, brain development, effects of substance abuse on prenatal and child development, and family violence issues before they leave high school.
5. Ensure that all families have necessary literacy skills to support their child's language development.

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OUTCOME #3

Children live in families that have access to a continuum of health and human services.

Of primary importance for all families is access to competent and comprehensive health and human services. All children need services like well-baby checkups, immunizations, nutrition services, and access to health care professionals when they are sick.

Some families will need long-term access to services and supports. For example, a child born with special needs will need the expertise of an infant/toddler specialist, specialized supports during their preschool years, and continuing assistance in public schools.

There must be a check-and-balance system—a continuum of care and support—where individuals, families, schools, peer groups, and community institutions work together effectively when there are problems in children's lives.

All children need services like well-baby checkups, immunizations, nutrition services, and access to health care professionals when they are sick.

Suggested Strategies

1. Create and support integrated community teams that use a strength-based family service model in planning for and delivering services.
2. Ensure all children and families have access to a continuum of services.
3. Identify and minimize barriers to service accessibility, including: transportation, child care, cost of services, access without lengthy waiting visits, service delivery that makes sense for families (i.e. schools, homes, neighborhood centers).
4. Develop outreach strategies for isolated families so they can access community-based service delivery.
5. Increase the pool of mental health professionals who are qualified to serve young children and their families and ensure they are accessible to schools, child protection caseworkers, early care and education providers.

OUTCOME #4

Children live in violence-free homes.

If the three previous outcomes are met, children are likely to be safe in their homes. However, many children and families face severe hardships.

The most destructive force facing Alaska children is living in homes where there is family violence, and alcohol and drug abuse. Statistics demonstrate that domestic violence is a leading indicator that child abuse is occurring in the same household. Unfortunately, our support systems may not act when there is no evidence of physical harm against the child.

For those children who are at-risk of physical and emotional harm, it is critical that services be provided as early as possible, reducing the need for children to be removed from their homes to guarantee their safety.

Tiers of support are needed to ensure all children are safe, beginning with prevention and early intervention programs.

Suggested Strategies

1. Develop a three-tiered support system to provide comprehensive intervention services to families who: 1) exhibit early warning signs of risk; 2) have been identified through the child protection system as at risk of out-of-home placement for their children; and 3) require immediate action to remove children from harm.
2. Provide mental health services for all children who are identified as at risk, who have been taken into state custody, or who have been referred for mental health assessment by families, child care providers, teachers, or human service providers.
3. Require a risk-assessment on all children in the home when an incident of domestic violence has been reported.
4. Require a substance abuse screening for parents/guardians of children taken into custody.
5. Establish a permanency plan for each child taken into custody.
6. Ensure substance abuse programs are immediately accessible, culturally diverse, match the needs of the individual and provide aftercare supports in the home community.
7. Continue the development of statewide child abuse prevention networks that emphasize community resource building and the development of a prevention framework that is comprehensive, consistent and integrated statewide.

Tiers of support are needed to ensure all children are safe, beginning with prevention and early intervention programs.

INDICATORS

The following indicators will be used to measure our progress and gauge success in achieving our outcomes:

- Percent of stable new families: first birth to mother who has completed high school, is age 20 or older and father's name is recorded on birth certificate
- Number of families with income below the Federal poverty threshold
- Percent of children entitled to child support who are receiving it
- Number of people on waiting lists for community mental health and infant learning services, etc.
- Number of families receiving food stamps
- Number of domestic violence reports where children are witnesses

Next steps to supporting healthy stable families

What can my community do?

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What can my agency/business do?

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What can I do?

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DEVELOPING SUPPORTIVE NEIGHBORHOODS AND COMMUNITIES

Opportunities

Alaska is blessed with a rich diversity. Alaskans live in small villages and tiny towns, on islands, in highway communities, and in suburban and urban neighborhoods. Even within larger populations there are many sub groups who share a common vision and values that represent another kind of community.

What all communities share is the opportunity for collective action to promote healthy circumstances for young children and their families. Strategies for change have been found to be most effective when they grow out of communities and when they are led by local people and organizations.

What all communities share is the opportunity for collective action to promote healthy circumstances for young children and their families.

The state can encourage and support local efforts and assure that policies and service systems do not create barriers to community success. It is, however, vital for the community to engage the public and build the political will for change.

At a national level, the Healthy Community Agenda Campaign has identified seven characteristics of a healthy community. These patterns should be viewed as complimentary and as having a cumulative positive effect.

A healthy community

1. **Practices Ongoing Dialogue.** Seeks to build relationships among residents to create a shared commitment to take action.
2. **Generates Leadership Everywhere.** Seeks to cultivate new leaders, using effective styles of facilitation and collaboration to make sure everyone is heard, and builds the commitment and wherewithal to improve.
3. **Shapes Its Future.** Recognizes a problem and starts to do something about it, finds out that others are interested and creates a shared vision, realizing that there is much within their control.
4. **Embraces Diversity.** Sees diversity and differences as a source of vitality, strength, and renewal. Recognizes the community is not all it can be until everyone is participating.
5. **Knows Itself.** Seeks data and information about the community, knows what data needs to be collected based on what is important to the community. Does not allow the lack of data to be an excuse for inaction.

6. **Connects People and Resources.** Helps to connect people to health care and social services, cultural offerings, and recreational opportunities. Recognizes that an accessible and resource-rich environment leads to improved health and quality of life.
7. **Creates a Sense of Community.** Understands who and what they are, based on a shared set of values and behavioral standards, neighborliness, an acknowledgment of interdependence and a commitment to the common good.

Strategies for change have been found to be most effective when they grow out of communities and when they are led by local people and organizations.

By taking action and making choices that support these seven characteristics, a community is moving toward realizing a broad definition of health and well-being that includes concerns for personal well-being, society, the economy and the environment.

There is evidence that the patterns and the actions that support them, will lead to healthier people, in economically and socially viable communities that preserve the riches of the natural environment.

OUTCOME #1

Children are safe in their communities.

Young children depend on communities and neighborhoods to take deliberate steps to ensure their safety and provide opportunities for play and development. There must be adequate environmental safeguards, including safe water for drinking, appropriate sewage and waste disposal, and clean-air standards.

There must be adequate environmental safeguards, including safe water for drinking, appropriate sewage and waste disposal, and clean air standards.

There must be adequate protections against the leading causes of death in young Alaska children—unintentional and intentional injuries. Appropriate child-protection systems, relief and support systems for parents and children in distress, as well as safeguards related to transportation, firearms, toxins, communicable diseases, and crime must be in place to give children the security they need.

Suggested Strategies

1. Establish community standards for safe playgrounds.
2. Ensure that communities know the types of injuries children experience and understand their causes.
3. Support community policies and practices to eliminate or reduce known hazards.
4. Promote safety programs or coalitions in communities that increase protections for young children.
5. Assure adequate animal control efforts to prevent bites and mauling.

6. Develop community plans for shelter or safe homes for families suffering from domestic violence.
7. Assure an adequate police, fire and emergency response system.
8. Educate community members regarding the health and safety of all children in the community so they can take action when children are in danger.
9. Ensure that the community has appropriate standards for clean air, safe water, sewage and waste disposal.

We must provide adequate protections against the leading causes of death in young Alaska children — unintentional and intentional injuries.

OUTCOME #2

Children grow up in communities where healthy behaviors are valued.

Healthy communities articulate and model behaviors that promote the well-being of young children.

These behaviors encompass all aspects of life—from physical fitness to healthy relationships. However, some of the behaviors most detrimental to children in our state relate to the use and abuse of alcohol, illegal drugs, inhalants and tobacco.

Healthy communities look for ways to discourage children from using harmful substances, and step in when adult use threatens the health and safety of young children.

Communities that are clear and consistent about behavioral standards lay a foundation of support that helps families make choices that are in the best interests of their children.

Suggested Strategies

1. Ensure zero tolerance for drunken driving.
2. Educate the community regarding local rates of smoking and other tobacco use and about community action to stop vendors who sell to children.
3. Educate the community about local rates for alcohol consumption and alcohol-related crime.
4. Support community efforts to prevent tobacco, drug and alcohol abuse including exposure to second-hand smoke.
5. Encourage community sponsorship of social and recreational opportunities for children and families to promote physical fitness and healthy lifestyles.
6. Ensure services are available in the community for those battling drug, alcohol and tobacco addiction.
7. Promote community support and sponsorship of public-awareness campaigns aimed at preventing common health problems.

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OUTCOME #3

Children live in communities that plan and act collectively in their best interest.

Children thrive when there are a variety of supports and opportunities available in their community.

Children thrive when there are a variety of supports and opportunities available in their community. In these communities, every generation is actively involved in the support of young children. Communities that value and protect young children and their families show a commitment to child-rearing that benefits the whole population.

Local governmental policies and laws can support families by subsidizing or reducing fees for young children's activities. Community organizations and businesses can put in place family-friendly policies and practices.

Faith communities can provide reliable support for children and families. By taking on responsibilities outside of their own families, individual volunteers also can make meaningful investments in their communities.

Suggested Strategies

1. Assist communities in writing a plan for supporting young children and their families.

2. Help communities develop mentoring programs, family supports and activities that are intergenerational.
3. Help communities promote inclusive community dialogue on issues of concern to children and their families.
4. Help communities develop neighborhood parks and play areas that are child and family friendly.
5. Encourage communities to recruit parents of young children for local policy or advisory committees or boards.
6. Provide community-specific data about the health and well-being of young children.
7. Encourage volunteers to work with and support young children in their communities.

OUTCOME #4

Children live in communities where facilities are available for broad use.

Communities can support children and their families by making public facilities available for their use. These facilities include schools, libraries, health clinics, hospitals, recreational facilities, community activities centers, senior centers, child-care centers, museums and theaters.

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Facilities that welcome children provide a sense of community and promote safe, positive experiences.

We recognize that, increasingly, community resources are necessary to build and maintain public facilities. To support children and families, communities need economic stability—which goes beyond the scope of this project. However, it is important for all children to have a variety of opportunities within their communities, regardless of family income.

Communities can support children and their families by making public facilities available for their use.

Suggested Strategies

1. Support opening schools for community use outside of regular school hours.
2. Support community efforts to make other public buildings available for activities that involve young children and their families.
3. Help communities find ways to support local facilities that sponsor or plan activities for young children.
4. Encourage local businesses to support or sponsor activities for children in their community.
5. Support community efforts to develop adequate housing.
6. Support community efforts to ensure that few families with young children live in poor or very poor neighborhoods.
7. Support community efforts to develop and maintain streets and other public places.

It is important for all children to have a variety of opportunities within their communities, regardless of family income.

INDICATORS

The following indicators will be used to measure progress and gauge success in achieving outcomes:

- Crime rate
- Incidence of alcohol-related crime
- Incidence of alcohol-related child abuse and neglect
- Voter turnout rate for local elections
- Number of schools open for use outside of regular school hours

Next steps for developing supportive neighborhoods and communities...

What can my community do?

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What can my agency/business do?

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What can I do?

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ESTABLISHING SUPPORT SYSTEMS

Collaboration

Building Blocks identifies significant and measurable outcomes for our youngest children and their families.

Success in achieving and maintaining desired outcomes for children is directly tied to state and local support systems working together.

The state is responsible for:

- Creating child and family policy through legislative and executive action;
- Setting policy guidelines and standards;
- Generating state revenues and receiving revenues from federal and private sources;
- Administering funds through contracts, grants, etc. to other state agencies, local agencies or private providers;
- Creating and providing training and technical assistance to state, local and private personnel;
- Monitoring for compliance with established federal and state policy and guidelines;
- Setting research and data collection priorities and evaluating outcomes at both the state and local level; and
- Initiating planning efforts to ensure a package of comprehensive, seamless services are available to children and families across departments.

The strength of support systems can be found in the way state agencies work together and the relationships they establish within local communities.

In Alaska, the state departments of Education & Early Development and Health and Social Services administer the majority of children's programs. Five other departments also administer programs for children and families.

The state has taken some significant steps in building strong interdepartmental and community relationships. Through the Governor's Children's Cabinet, the annual State of the Child Address, the Governor's Budget for Children, implementation of the Alaska Children's Trust, and consolidation of some children's programs in the expanded Department of

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Education & Early Development, the executive branch has established a strong policy focus on young children and their families.

If the state is to make progress in improving outcomes for children, both the legislative and executive branches of government must maintain a strong and directed focus on early childhood issues and establish them as a high priority in legislative, funding and policy agendas.

If the state is to make progress in improving outcomes for children, both the legislative and executive branches of government must maintain a strong and directed focus on early childhood issues and establish them as a high priority in legislative, funding and policy agendas.

The strength of support systems can be found in the way state agencies work together and the relationships they establish within local communities. While a strong cabinet-level relationship has been established, few formal mechanisms exist at the program manager level to build collaborative relationships.

Personal relationships seem to be the primary reason that state agencies work, or do not work together. Consequently, there is no guarantee that departments will collaborate to make joint funding, service-delivery, or long-range planning decisions.

The majority of direct services are provided at the community level through local government, private service providers, for-profit or nonprofit agencies and others. Every state agency has some type of relationship with local communities.

Primarily these relationships are based on funding either through direct pass-through funds or grants and contracts to local service providers. As a result, state/local relationships are often fragmented and complicated. Few communities have developed a comprehensive plan for young children that the state could use as a guide for funding and technical support.

The development of this initiative, which blends the responsibilities of two departments, is a major step in building a strong support system.

OUTCOME #1

Children and families are supported by state and community systems.

The following strategies are focused on building an ideal system of supports that reflects the comprehensive needs of young children.

Suggested Strategies

1. Establish an interdepartmental budget planning process that identifies barriers and opportunities for sharing resources, and plots comprehensive services.
2. Link budget and funding to outcomes/strategies and develop a process to track funding and outcomes over time.
3. Educate state and community personnel about the state budget process.
4. Set concrete, measurable goals for child well-being and establish a performance accountability system for evaluating outcomes.

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5. Develop an interdepartmental data/research plan that identifies data/research needs.
6. Establish and support methods to report/publish data for communities, the public, state/private agencies.
7. Provide technical assistance, resources, etc. to communities to develop comprehensive plans that address needs of young children and their families.
8. Develop a state process to support and assist communities with the implementation of local plans.
9. Establish an Early Childhood Collaboration Council to combine or coordinate the work of existing committees; establish formal partnerships between the state, communities, private agencies and businesses; and develop recommendations, action plans or policies for state and local consideration.
10. Establish formal mechanisms to sustain collaboration between departments at the program manager level and below and to integrate service planning efforts, and eliminate duplication of efforts.
11. Establish a formal structure for collecting information on and coordinating interdepartmental activities, grants, projects.
12. Establish state policies and procedures that model family-friendly work policies and practices, professional development in the field of Early Childhood Education, and best practices for children.
13. Formalize state policy and goals for children birth through age 8 by expanding the existing State Board of Education & Early Development goals.
14. Focus on prevention as a state priority by establishing funding strategies dedicated to prevention.
15. Establish processes and timelines for initiative completion and establish a schedule for review, revision and reporting on progress of the initiative.
16. Report on indicators of child well-being.

INDICATORS

The following indicators will be used to measure progress and gauge success in achieving outcomes:

- Development of inter-agency work plan
- Development and implementation of inter-agency budget
- Implementation and publication of interdepartmental indicators of child well-being

Next steps to establishing support systems

What can my community do?

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What can my agency/business do?

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What can I do?

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IN CONCLUSION AND INTO THE FUTURE

Children are our state's greatest natural resource. Families, communities and those who work on behalf of children, at every level, sincerely desire to do more and better work each day for children.

Why the focus on prenatal through age eight? This initiative focuses on young children because it is the best place to start—a touch point for children and families. Here we can begin the prevention and intervention work that can eliminate or mitigate future problems and reduce the need for costly remediation later. The focus on helping Alaska's children to be healthy and successful cannot begin too soon.

Building Blocks articulates many of the challenges faced by children and their families today and identifies outcomes and strategies which, if accomplished, could significantly improve the lives of many children.

The next step is ACTION by many people, in many places, for a sustained period of time. Families, communities and the government need to decide what they can do individually and collectively and do it.

The departments of Education & Early Development and Health and Social Services are committed to beginning now, using this plan as a framework, to develop joint workplans that are integrated and build upon each other's work and strengths. Grants will be written together, program plans and service delivery systems will be jointly designed and implemented and collaborative evaluation put into place to determine program and service effectiveness and efficiency.

Many individuals, representing diverse groups and opinions, provided input into the development of this initiative. They offered ideas, editing, support and encouragement.

These individuals and many more are invited to become full partners in its implementation. This is a work in progress and it will take the creative capacity and energy of everyone in Alaska to turn the initiative into programs and services that better serve Alaska's young children and improve their overall health and well-being.

We have begun the preparation...how the race is run and whether we win it on behalf of all the children depends on each of us. Please encourage your friends, family, business and professional colleagues and community groups to identify at least one thing they can do that will make a difference for children. Every effort and every person will make a difference. The children are counting on us—we must not let them down.

Next steps . . .

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Next steps . . .

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